Approved for use through 10/31/2003. OMB 0651-0013  U. S. Patant and Trademark Office, U.S. DEPARTMENT OF COMMERCE  Under the Paperwork Reduction Act of 1995, no persons are travered to respond to a collection of information unless it displays a valid OMB control number.												
PATENT APPLICATION FEE DETERMINATION RECORD  Application									O Docket Number			
							0	111	OTHER T	7 / / HAN		
CLAIMS AS FILED - PART ( (Column 1) (Column 1)						SMAL	LENTITY	OR	O.111211			
FOR			NUMBER FILED		NUMBER EXTRA		E FEE	]	RATE	FEE		
BAS	IC FEE		<b>α</b> 1				F 5	OR		\$2/0		
020	AL CLAIMS		ninus 20 •					OR	x\$ 18 =	18		
(17 0	FALINON PENDENT CLA	IMS O	2 mau 1 ·				-	OR	x =	70		
010	FR (.14(b))					-		OR	+ =			
MULTIPLE DEPCROENT CEXTO TICOSTA						TOTA		OR	TOTAL	728		
If the difference A column t is less than zero, enter "0" is column t						101/	·· \	<b>1</b> 0"	OTHER T			
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)				SMAL	L ENTITY	OR -	SMALL E				
AMENDMENT A	39	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	+ )	Minus	• 37	- C	x s	_	OR	x \$			
Z	(17 CFR 1.16(c)) Independent	• 2		7			_	OR	_			
₽ F	(17 CFR 1.14(b))	8	Minus		12	<del> </del>	<del>-</del>	OR	F			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.144))						_ =	OR	<u> </u>			
(Column 1) (Column 3)					ADDIT, FE		OR	DDIT. FEE				
AMENDMENT B	and the same	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	**	=	x 5	<u>-   </u>	OR OR	x \$=			
	Independent	• .	Minus	•••	÷	<u>×</u>	_=	OR	x=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (1) CFR L1449					]}	_=  <u>.</u>	OR	+=			
(Column 1) (Column 2) (Column 3)						TOT ADDIT. I		OR,	TOTAL ADDIT. FEE			
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ADDI- E TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•	Minus	••	-	x 5	_ =	OR	x \$=			
	(17 CFR 1.14(a)) Independent (17 CFR 1.14(b))	•	Minus	***	=	x	_=	OR OR	×=			
7	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (DICTALING)							OR	t =			
			e entry in entry	me 2 write "0" in colu	ımn 3.	TO ADDIT.	TAL FEE	OR	TOTAL ADDIT. FEE			
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ADDIT. FEE  ADDIT. FEE  This SPACE is less than 70, enter "20".  If the "Highest Number Previously Paid For" In THIS SPACE is less than 3, enter "1".  If the "Highest Number Previously Paid For" In THIS SPACE is less than 3, enter "1".												

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate both with the Commission of the Independent of Independent